

See how the Covid lies are breaking down « SaveCalifornia.com Blog//

23-29 minutes

The Leftist lies continue to fall apart. Despite leaving many victims in its wake, Covid tyranny is hitting a wall of reality. The scaremongering is becoming more obvious because of evidence, logic, and the hypocrisy of medical tyrants.

In the midst of this ferocious battle over your God-given liberties and hard-won constitutional rights, I'm providing answers to these questions to equip and empower you:

Is this a "pandemic of the unvaccinated"?

Why are the vaccinated getting infected with a mutation ("Delta," "Omicron")?

Why don't the "Covid vaccines" prevent viral infection or transmission?

Why don't paper and cloth masks prevent transmission of viruses?

Will the U.S. Supreme Court uphold medical freedom or religious freedom?

Will the medical tyranny ever end?

Q: Is this a "pandemic of the unvaccinated"?

A: No, the "vaccines" have caused and are spreading the Covid variants.

But the vaccines themselves could drive the evolution of more mutants ... PAUL BIENIASZ: They might serve as sort of a breeding ground for the virus to acquire new mutations. HARRIS: That's because the virus is always mutating. And if one happens to produce a mutation that makes it less vulnerable to the vaccine, that virus could simply multiply in a vaccinated individual.

— “[Vaccines could drive the evolution of more COVID-19 mutants](#),” NPR, February 9, 2021

Communities such as Lancaster, Palmdale, Studio City, and Santa Clarita were among the 10 areas of Los Angeles County that had the highest rates of new COVID-19 infections during a two-week period ending Nov. 6, despite most of the Areas on the list have above-average vaccination rates, said the district’s health director on Thursday.

— “[Mystery emerges amid COVID-19 patterns in Los Angeles County](#),” Angelino News, November 18, 2021

A German government report found more than 95% of reported cases of the omicron COVID-19 variant in the country were in vaccinated individuals. Only 186 people in a sample of 4,206 individuals who contracted the new variant were unvaccinated, according to a Dec. 30 report by the Robert Koch Institute, the National Pulse reported. The vaccinated people who tested positive for omicron had at least two doses. Among the infected, 28% had received a third dose or “booster” shot. Nearly 90% of the German population has received at least two doses.

— “[Government report: 95% of omicron cases are among vaccinated](#),” WND.com, January 3, 2022

A Danish study of nearly 12,000 households has discovered that Omicron spreads faster than Delta among those who are fully vaccinated, and even higher between those who have received booster shots, demonstrating strong evidence of the variant’s immune evasiveness. The Omicron variant was found to evade the immunity of vaccinated individuals at a much faster pace compared to Delta, and at a higher rate than the unvaccinated, according to the study conducted by researchers at the University of Copenhagen, Statistics Denmark, and Statens Serum Institut. “Comparing households infected with the Omicron to Delta VOC, we found an 1.17 times higher SAR for unvaccinated, 2.61 times higher for fully vaccinated and 3.66 times higher for booster-vaccinated individuals, demonstrating strong evidence of immune evasiveness of the Omicron VOC,” said the preprint of the study. SAR refers to secondary attack rate.

— “[Omicron spreads faster than Delta within vaccinated individuals: Danish study](#),” The Epoch Times, January 4, 2022

New research published in the European Journal of Epidemiology has found that mass “vaccinating” people for the Wuhan coronavirus (Covid-19) is not helping to stop the continued outbreaks. Even though governments and vaccine corporations claim that the injections are the best tool currently available to “stop the spread,” the data shows that the areas being

hardest hit by new “variants” and waves of disease and death are those that have the highest injection rates.

— “[Study: Vaccines don’t stop covid outbreaks \(and actually cause more of them\)](#),” Ethan Huff, Natural News, January 5, 2022

While high-level officials continue to use the term “pandemic of the unvaccinated,” suggesting the COVID-jabbed play no role in the epidemiology of COVID-19, there’s ample evidence that the “fully vaccinated” have a relevant role in transmission and outbreaks. For example, in Massachusetts, 469 new COVID-19 cases were identified during July 2021. Of those, 346 (74%) were either fully or partially jabbed, and 274 (79%) were symptomatic. This proves the COVID jabs cannot end the pandemic, and may in fact be preventing it from dying out naturally.”

— “[Stigmatizing the unvaxed and unboosted](#),” Dr. Joseph Mercola, January 5, 2022

Risch noted the agency told physicians to put COVID on death certificates regardless of whether they think the infection played a role. Hospitalizations have also conflated admissions “with” and “from” COVID, he said. As a member of a committee advising Connecticut early in the pandemic, Risch urged ignoring case counts and focusing on hospitalizations and deaths. That advice was largely ignored until the current “sky-high” yet mild Omicron variant wave, but now “finally people are waking up to say that the cases don’t matter,” he said. The U.K. is among countries that more carefully track COVID, according to Risch. Its data show vaccinated adults constitute the majority of cases, “and it’s not a hospitalization of the unvaccinated” either.

— “[Top epidemiologist Harvey Risch blasts Fauci’s COVID strategy, CDC data and research](#),” Greg Piper, Just The News, January 7, 2022

Q: Why are the vaccinated getting infected with a mutation (“Delta,” “Omicron”)?

A: Because these “vaccines” harm people’s immune systems, leaving them vulnerable.

[With Original Antigenic Sin], the immune system will respond to a pathogen in a way shaped by its first exposure to it regardless of how the pathogen may have changed. This could blunt the response to altered boosters (an Omicron-specific booster, for example) because when the boosters activate the immune system, the original response is recalled and hampers the ability of immunity more specific to the new version of the pathogen from being developed... In the context of Omicron, it’s worth considering how original antigenic sin factors into discussions of boosting young, healthy adults with the current COVID-19 vaccines.

— “[Don’t jump the gun on boosting all adults](#),” Dr. Amesh Adlja, Medpage Today, December 2, 2021

Previous coronavirus vaccine efforts — including those for SARS, MERS and RSV — have revealed a serious concern: The vaccines have a tendency to trigger antibody-dependent enhancement (ADE). ADE means that rather than enhance your immunity against the infection, the vaccine actually enhances the virus’ ability to enter and infect your cells, resulting in more severe disease than had you not been vaccinated. Lethal Th2 immunopathology is another potential risk. A faulty T cell response can trigger allergic inflammation, and poorly functional antibodies that form immune complexes can activate the complement system, resulting in airway damage. There’s evidence showing the elderly — who are most vulnerable to severe COVID-19 and would need the vaccine the most — are also the most vulnerable to ADE and Th2 immunopathology.

— “[How COVID-19 vaccine can destroy your immune system](#),” Dr. Joseph Mercola, November 12, 2020

ADE is certainly a reason for concern. We know that, as these antibodies wane, the risks increase. Now that there is no placebo, how do we compare? Only those who remain unvaccinated will be able to be a control group of sorts. There are so many reasons to be concerned when it comes to adverse events to these vaccines. We’ve heard for nearly a year, now, about the growing numbers of reports to VAERS. Now at 946,461 reports, it is clear that cases of myocarditis, blood clots, Guillain-Barre Syndrome, women’s health problems, and other nervous system disorders aren’t “rare,” and warrant a halt. Now these vaccines are being given to children. Many of these kids already have natural immunity and no need for the vaccine. What happens when over the course of their lives they come into contact with this virus? We don’t know, and we won’t because the trials were unblinded.

— “[Fauci admits vaccines can ‘make people worse’ with ADE](#),” Dr. Patrick Flynn, December 17, 2021

ADE – In this scenario, the antibodies that the vaccine generated actually help the virus infect greater numbers of cells than it would have on its own. In this situation, the antibodies bind to the virus and help it more easily get into cells than it would on its own. The result is often more severe illness than if the person had been unvaccinated ... So where does this leave

the vaccinated? Potentially, in BIG trouble. The vaccinated seem to be at far greater risk now BECAUSE they took the vaccines. Their immune systems have been “taught” by the mRNA vaccines, to respond to this outbreak a certain way, but the virus, having encountered the vaccine in others, adapted to get around the vaccine so it could survive. The vaccinated actually caused this mutation, CAUSED this new variant. And now that the immune systems of the vaccinated have been “taught” to handle the virus a specific way, that way is now . . . wrong. The vaccinated must now take far greater precautions than the un-vaccinated. Because if an un-vaxed person catches OMICRON, their immune system will handle it like it handles any other disease. But if a VACCINATED person catches OMICRON, their immune system will handle it wrong, and they will get far sicker and perhaps die.

— “[Official numbers: 95.58% of Omicron cases — fully vax'd!](#)” Hal Turner Radio Show, December 30, 2021

Q: Why don't the “Covid vaccines” prevent viral infection or transmission?

A: They were never made to, and cannot compete with the superior protection of a strong immune system. Yet these “vaccines” have injured or killed many people.

Fully vaccinated people who get a COVID-19 “breakthrough” infection can spread the virus to others even if they are not symptomatic, Centers for Disease Control Director Rochelle Walensky told CNN on Thursday. She warned that an autumn/winter surge in the COVID “Delta” variant could again see hundreds of thousands of cases per day. “Our vaccines are working exceptionally well,” she said. “They continue to work well with ‘Delta’ with regard to severe illness and death, but what they can't do anymore is prevent transmission.”

— “[CDC Director: Vaccines no longer prevent you from spreading COVID](#),” Tim Hains, RealClearPolitics, August 6, 2021

The reason natural immunity is superior to vaccine-induced immunity is because viruses contain five different proteins. The COVID vaccine induces antibodies against just one of those proteins, the spike protein, and no T cell immunity. When you're infected with the whole virus, you develop antibodies against all parts of the virus, plus memory T cells. This also means natural immunity offers better protection against variants, as it recognizes several parts of the virus. If there are significant alterations to the spike protein, as with the Delta variant, vaccine-induced immunity can be evaded. Not so with natural immunity, as the other proteins are still recognized and attacked.

— “[Is natural immunity more effective than the COVID-19 shot?](#)” Dr. Joseph Mercola, January 2, 2022

The CDC's latest count of deaths attributed to COVID-19 vaccines is nearly 20,000, but a study by researchers at Columbia University estimates the actual number is 20 times higher. The Vaccine Adverse Events Reporting System, or VAERS, reports 19,886 deaths, 102,857 hospitalizations and a total of 946,461 adverse events due to COVID-19 vaccines through Dec. 3. If the Columbia study's underreporting factor is correct, it would mean that there are nearly 400,000 deaths due to COVID-19 vaccines ... The researchers said the study “suggests the risks of COVID vaccines and boosters outweigh the benefits in children, young adults and older adults with low occupational risk or previous coronavirus exposure.”

— “[Columbia study: True U.S. COVID vaccine death count is 400,000](#),” Art Moore, WND.com, December 15, 2021

Scott Davison, the CEO of OneAmerica, a \$100 billion insurance company based out of Indiana, has come out publicly and stated that based on life insurance claims, the death rate has skyrocketed an unprecedented 40% among those between the ages of 18 and 64, based on the 3rd quarter and into the 4th quarter of 2021.“

— “[Crisis in America: Deaths up 40% among those aged 18-64 based on life insurance claims for 2021 after COVID-19 vaccine rollouts](#),” Health Impact News, January 3, 2022

See reports you're not seeing in the Big Media of injuries and deaths resulting from the “Covid vaccines”:

[Health Impact News | The Covid Blog](#)

Q: Why don't paper and cloth masks prevent transmission of viruses? A: Viruses pass through masks' large holes. And the N95 masks won't work either.

...masks do not prevent community transmission of respiratory viruses. Between 2008 and 2020, 12 consecutive randomized controlled trials of community masking, conducted among approximately 18,000 persons worldwide, established that this intervention does not reduce community respiratory virus transmission, including COVID-19 transmission.

— “[Why forcing unvaccinated students to wear cloth masks is anti-science](#),” The Federalist, August 18, 2021

Disposable medical masks (also known as surgical masks) are loose-fitting devices that were designed to be worn by medical personnel to protect accidental contamination of patient wounds, and to protect the wearer against splashes or sprays of bodily fluids. There is limited evidence for their effectiveness in preventing influenza virus transmission either when worn by the infected person for source control or when worn by uninfected persons to reduce exposure.

— “[Masks don’t stop viruses – the proof](#),” Ben Armstrong, WSAU Radio, July 31, 2020

COVID-19 can be transmitted between people who are standing more than four feet apart, even if they are wearing a mask, a new study has found. The research, published in Physics of Fluids, notes that face coverings alone do not prevent droplets of fluid that are projected by a cough...”

— [Coronavirus can still pass between face mask wearers — even when they’re 4 feet apart: study](#),” Fox News, June 16, 2020

New findings reported Tuesday in a University of Louisville study challenge what has been the prevailing belief that mask mandates are necessary to slow the spread of the Wuhan coronavirus. The study notes that “80% of US states mandated masks during the COVID-19 pandemic” and while “mandates induced greater mask compliance, [they] did not predict lower growth rates when community spread was low (minima) or high (maxima).” Among other things, the study—conducted using data from the CDC covering multiple seasons—reports that “mask mandates and use are not associated with lower SARS-CoV-2 spread among US states.”

— “[Masks didn’t slow COVID spread: New study](#),” Townhall, May 26, 2021

“Don’t wear a cloth mask. Cloth masks are little more than facial decorations. There’s no place for them in light of Omicron.”

— [CNN Medical Analyst Dr. Leana Wen, December 21, 2021](#)

Surgical mask … does NOT provide the wearer with a reliable level of protection from inhaling airborne particles and is not considered respiratory protection.

— [Centers for Disease Control and Prevention](#), Dr. Chitra Durgam, December 22, 2021

The typical mask you buy in the drug store is not really effective in keeping out virus, which is small enough to pass through material.

— “[Fauci said masks ‘not really effective in keeping out virus,’ email reveals](#),” Newsweek, June 2, 2021

People with chronic respiratory, cardiac, or other medical conditions that make breathing difficult should check with their health care provider before using an N95 respirator because the N95 respirator can make it more difficult for the wearer to breathe. Some models have exhalation valves that can make breathing out easier and help reduce heat build-up. Note that N95 respirators with exhalation valves should not be used when sterile conditions are needed. All FDA-cleared N95 respirators are labeled as “single-use,” disposable devices. If your respirator is damaged or soiled, or if breathing becomes difficult, you should remove the respirator, discard it properly, and replace it with a new one. To safely discard your N95 respirator, place it in a plastic bag and put it in the trash. Wash your hands after handling the used respirator. N95 respirators are not designed for children or people with facial hair. Because a proper fit cannot be achieved on children and people with facial hair, the N95 respirator may not provide full protection.

— “[N95 respirators, surgical masks, face masks, and barrier face coverings](#),” U.S. Food & Drug Administration, September 15, 2021

NOTE: Therefore, the Los Angeles County “public health officer” order (issued late on Friday, December 31) to “mandate” face masks is unscientific. For all practical purposes, neither paper nor cloth nor N95 masks will block infection. And private schools should definitely not comply with this largely unenforceable “order”:

Employees at all Los Angeles County public and private schools will have to wear medical grade masks at work and students and staff must wear masks outdoors in crowded spaces under tightened rules issued in anticipation of classes beginning Monday amid a major surge of the highly contagious Omicron variant of the coronavirus … Masks must be worn outdoors “in crowded spaces where physical distancing is not feasible” except when actively eating and drinking. In the fall, outdoor masking was not required, although individual districts could do so. L.A. Unified — the nation’s second-largest district — was among the school systems that required outdoor masking. The county letter also recommended — but did not require — that students wear higher-grade, not cloth, masks and urged anyone eligible to get a booster dose of the coronavirus vaccine.

— “L.A. County public, private school staff must wear high-grade masks; rules for athletes tighten,” Los Angeles Times, January 2, 2022

Q: Will the U.S. Supreme Court uphold medical freedom or religious freedom?

A: It's plausible — the first hearing for SCOTUS and vaccine mandates is Jan. 7.

Lawsuits based on medical freedom and religious freedom by hospital employees, police officers, firefighters, college professors, parents, business owners, military personnel, and more are working their way to the U.S. Supreme Court. And there are many others arguing in their state courts.

Friday morning, January 7, the U.S. Supreme Court — for the first time — will [hear oral arguments](#) on our modern medical “mandates.” One consolidated case is about the medical freedom and religious freedom rights of large businesses (challenging Biden & Co.’s OSHA “the jab or your job” mandate). The other consolidated case is about the rights of hospitals and hospital employees to say no to “the jab or your job.”

Also on its way to the nation’s high court is [Liberty Counsel’s class action lawsuit](#) representing the religious rights of “all five branches of the military, federal employees, and federal civilian contractors who have been unlawfully mandated to get the COVID shots or face dishonorable discharge from the military or termination from employment.”

While Friday’s OSHA and hospital employees cases are being heard on an accelerated basis, which portends the likelihood of a decision this very month, whichever “medical mandate” cases SCOTUS hears this winter and spring will be decided [by the first or second week of summer](#).

SaveCalifornia.com wants a broad ruling that all medical treatment — including injections — must be voluntary. If not that, we desperately need at least religious exemptions to vaccines upheld nationwide.

Q: Will the medical tyranny ever end?

A: Believe it or not, some establishment voices imply it must end soon.

‘The days of lockdown are gone. We’re going forward. We’re not going back. That’s not how you manage this virus. The Prime Minister said the dominant Omicron variant was 75 per cent less severe than the Delta strain and could be publicly managed like other infectious diseases such as flu ... The Prime Minister also revealed he will talk to the premiers this week about agreeing on a definition of Covid hospitalisation amid fears the numbers are artificially high and giving a false picture. ‘There are people being counted as being in hospital for Covid when they didn’t go there for Covid, they went there for some other reason,’ Mr Morrison said ... He concluded by saying Covid will eventually be treated like flu and Australians can move on with their lives. ‘We can ultimately manage this like any other infectious disease. That’s the pathway out,’ he said.

— “Australia will NEVER go back into lockdown because Covid case numbers don’t matter and Omicron can be managed like the flu, Scott Morrison says as he declares: ‘Let’s get on with it,’” Daily Mail, January 2, 2022

Acknowledging that the number of hospitalizations due to COVID-19 has been overstated, New York Democratic Gov. Kathy Hochul announced hospitals now must clarify if patients with the novel coronavirus came to the hospital due to symptoms of COVID-19 or because of another health issue. Saying she wants to “always be honest with New Yorkers about how bad this is,” Hochul said the state had reached “a critical moment” and “we’re going to start asking some questions.” “We talked about the hospitalizations. I have always wondered, we’re looking at the hospitalizations of people testing positive in a hospital,” she said Monday. “Is that person in the hospital because of COVID or did they show up there and are routinely tested and showing positive and they may have been asymptomatic or even just had the sniffles?” An example, she said, someone who gets in a car accident, goes to the emergency room and tests positive for COVID.

— “Governor admits COVID hospitalizations overcounted,” Art Moore, WND.com, January 4, 2022

New York Times columnist who has been closely following the COVID-19 pandemic observes that the data indicate the new omicron variant is roughly at the same risk level as the seasonal flu. David Leonhardt writes that the “latest evidence about Covid is largely positive.” ... “A few weeks ago, many experts and journalists were warning that the initial evidence from South Africa — suggesting that Omicron was milder than other variants — might turn out to be a mirage. It has turned out to be real,” he said. Because omicron is “milder than earlier versions of the virus, Covid now appears to present less threat to most vaccinated elderly people than the annual flu does,” he wrote.

— “New York Times: Omicron risk similar to the flu,” Art Moore, WND.com, January 5, 2022

Expect the surge in infections by the omicron variant of COVID-19 to peak soon. Omicron has spread across the U.S., after starting in the Northeast in mid-December. But the fast rise may also mean the variant is short-lived. South Africa, where omicron originated and surged in late November, saw a peak and a rapid decline in infections after three weeks. It has been almost three weeks since the omicron surge began in the U.S.

— [Kiplinger/Yahoo Finance](#), January 5, 2022

NOTE: California, run by unscientific, unconstitutional, anti-people Newsom & Co., will likely be the last to lift their “mandates,” which makes relief from SCOTUS vital.

Californians will have to keep wearing face masks indoors past Valentine's Day regardless of vaccination, the state's top health official said Wednesday as COVID-19 cases reached a new record fueled by the fast-spreading omicron variant. Health and Human Services Secretary Dr. Mark Ghaly said the face mask mandate will be extended a month to Feb. 15 and reevaluated then.

— “[California extends face mask mandates amid record COVID cases](#),” John Woolfolk, San Jose Mercury News, January 5, 2022

ADDITIONAL NOTE: This unscientific California Democrat masking “guideline” is despite [zero verifiable deaths from Omicron](#) (even the latest “Omicron death” claim from India is of a woman who [died from a stroke, not from a virus](#)). And despite Newsom & Co. violating all standards of fact-based epidemiology, even their own “case” rate [is crashing this week](#) and it’s apparent that Newsom has made yet another rash, unscientific, anti-people decision. Which is why SaveCalifornia.com urges people to protect their health, life, and liberties by [ignoring Newsom’s useless masking “guideline”](#) and refusing to participate in this harmful medical tyranny of the Democrats.

“You are the light of the world. A city that is set on a hill cannot be hidden. Nor do they light a lamp and put it under a basket, but on a lampstand, and it gives light to all who are in the house. Let your light so shine before men, that they may see your good works and glorify your Father in heaven.”

Jesus Christ, the Savior of the world and God in the flesh, in Matthew 5:14-16